FLORIDA UTILITY SERVICES 1, LLC 5911 TROUBLE CREEK RD. NEW PORT RICHEY, FL. 34652 863-904-5574

October 20, 2020

Commission Clerk Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL. 32399 CONMISSION OLERK RECEIVED-FPSC

RE: Application for a staff assisted rate case for Lake Yale Utilities, LLC Docket # 20200169

Dear Commission Clerk:

Enclosed please find the company's response to staff's second data request.

On behalf of the company,

Mike Smallridge.



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

SC	e page 4 for instructions	•						
Ι.	General Information	for the Month/Year of: FEB	/ 2019					
A.	Public Water System (I	PWS) Information						
	PWS Name: Sandpipe					PWS I	dentification Num	nber: 3351115
	PWS Type:	Community Non-Transient Non	1-Community	Transie	nt Non-Community			
	Number of Service Co	onnections at End of Month: 150			Total Population S	Served at End of Mo	onth: 270 _	
		le Utility Company, 11643 Martel Cou	rt, Leesburg,	FL 34788				
	Contact Person: T. Fel			- 1110	Contact Person's T	itle: Operator		
	Contact Person's Mail	ing Address: P.O. Box 491221			City: Leesburg	*	State: Florida	Zip Code: 34749-1221
	Contact Person's Telep	ohone Number: 352-787-2493			Contact Person's F	ax Number: 352-32	26-8756	
	Contact Person's E-Ma	ail Address: generalutilities@AOL.com	1					
В.	Water Treatment Plant	Information						
	Plant Name: Sandpipe	Г				Plant T	elephone Number	r: 352-589-9212
	Plant Address: C R 45				City: Leesburg	State: I	Florida	Zip Code: 34788
	Type of Water Treated			hased Finished V	Vater			
		Day Operating Capacity of Plant, gallon	is per day: 16	2,000				
		bsection 62-699.310(4), F.A.C.): V			Plant Class (per su	bsection 62-699.31	0(4), F.A.C.): D	
	Licensed Operators	Name		License Class	License Number		Day(s)/Shift(s)	Worked
	Lead/Chief Operator:	T. Felton		С	0002241		Varies	
	Other Operators:	D. Harris		Α	0014540		Varies	
		K. Ramsood		С	0015224		Varies	
		T. Levi		С	0012911		Varies	
		D. Longfellow		С	0017972		Varies	
		T. Hill		С	0024143		Varies	
П	Certification by Lead	l/Chief Operator	5 8 6 1 5 6 1 5 P	Joseph Agent so, * v 1446 ti	taris (1960) time solo espera	ar a realiste de la como o	sadar ver a sadar da ili salit della	esikat, rateren kustanokeitenista ili sisetti usotta kesitisi.
t l	e undersigned water tre	eatment plant operator licensed in Florid	da am the le	ad/chief operator	of the water treatm	ont plant identified	Lin Dort I of this a	an ant I a mai Cook had also
nfc	rmation provided in thi	s report is true and accurate to the best	of my knowl	edge and helief	I certify that all dri	ient plant identified	ont chemicals was	eport. I certify that the
NS	F International Standard	1 60 or other applicable standards refere	enced in subs	section 62-555 3	20(3) FAC Taleo	niking water treating	lowing additional	operations records for this
olai	nt were prepared each d	ay that a licensed operator staffed or vi	sited this pla	nt during the mo	nth indicated above	(1) records of am	ounts of chemical	s used and shomical food
ate	s; and (2) if applicable,	appropriate treatment process performa	ance records	Furthermore I	agree to provide the	ese additional oper	ations records to t	he PWS owner so the PWS
wi	ner can retain them, toge	ether with copies of this report, at a con	venient locat	tion for at least to	en vears	ese additional open	ations records to t	ne i ws owner so the i ws
					on youro.			
	11//	3/1/19	Thomas M	. Felton			0002241	
Sign	nature and Date	01.101		Typed Name		· · · · · · · · · · · · · · · · · · ·	License Numb	Ar
				1 , pod 1 talilo			FICEIRE MIIID	CI .
	/ /							

PWS	VS Identification Number: 3351115 Plant Name: SANDPIPER Daily Data for the Month/Year of: FEB / 2019													
II.	Daily Da	ata for tl	ne Month/Y	ear of	FER	/ 2010			-		, ;			
					on/Removal: *		Chlorine		Chlorine	Diovido		Dzone	Combin	ed Chlorine (Chloramines)
טרו	ltraviole	t Radiati	on Di	ther (Describ	ne).	L_J I I CC	Ciliornie	L	Ciliornie	Dioxide		Zone	☐ Comoin	led Chlorine (Chloramines)
					stribution Syst	em· 🔯	Free Chl	orine	ПС	mbined C	hlorine (Chloromi	nec)	Chlorine Dioxide
					r Calculations, or		monstrate F	our-Log	Virus Inactiv	vation if A	nnlicable*	Ciliorallii	iles)	Chlorine Dioxide
	Days		1			CT Calcu	lations	208	THUS HILLOTT	rucion, 11 71		Dose	1	
	Plant						Lowest CT						Lowest	
İ	Staffed]		Lowest Residual	Disinfectant	Provided						Residual	
-	or Visited				Disinfectant Concentration	Contact Time	Before or		:		<u>-</u>		Disinfectant	
	by		Net Quantity		(C) Before or at	(T) at C Measurement	at First Customer	Temp.		Minimum	Lowest Operating		Concentration	F
Day of	Operator	Hours	of Finished		First Customer	Point During	During	of	pH of	CT	UV Dose,	DV Dose	at Remote Point in	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,	Water,	Water, if	Required,	mW-	mW-	Distribution	Involves Taking Water System Components
Month	"X")		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable			sec/cm ²	System, mg/L	Out of Operation
1	/	24	15 000										0.7	
3	- ,	24	9 000			·			<u> </u>					
4	1	24 24	9 000 23 000										0.7	
5		24	2 C 000										o·7	
6	1	24	2 000										0-6	
7	1	24	1 4 000										0.7	
8		24	2 000										0.7	
9	1	24	6 000										0.7	
10	1	24	2 (000										0.6	
11		24	3 2 000										0.7	,
12		24	3 Y 000										0.7	
13	-	24 24	9 000										0.7	
15	7	24	9 000						· · · · · · · · · · · · · · · · · · ·				0.7	
16		24	7 000								-		0-8	
17		24	7 000						***************************************				0.8	BACT
18	7,	24	45 000										0.7	DRG
19	7	24	2 000										7:0	
20	/	24	1 4 000										0.7	
21		24	19 000										0.6	
22	/	24	8 000										0.7	
23		24 24	2 (000											
25	7	24	2 000		* *								0.7	
26		24	19 000										6.7	-
27		24	1 6 000										0.6	
28		24	1 7 000										0.7	
			000										0.7	
			000											
<u> </u>			000											
Total			464000							····				
Average			17 000											
Maximu	m		درچ 0000											



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

DEP Form 62-555.900(3)Alternate

			2019				
٩.	Public Water System (I	PWS) Information					
	PWS Name: Lake Yal					WS Identification Num	nber: 3354688
	PWS Type:	Community Non-Transient Non-Commun	ity 🔲 Transie	nt Non-Community	Conse	ecutive	
	Number of Service Co	onnections at End of Month: 58		Total Population S	Served at End	of Month: 101	
	PWS Owner: Lake Ya	le Utility Company, 11643 Martel Court, Leesbur	rg, FL 34788				
	Contact Person: T. Fel	lton		Contact Person's 7	<u> Γitle: Operator</u>		
	Contact Person's Maili	ing Address: P.O. Box 491221		City: Leesburg		State: Florida	Zip Code: 34749-1221
	Contact Person's Telep	phone Number: 352-787-2493		Contact Person's F	Fax Number: 3	352-326-8756	
	Contact Person's E-Ma	ail Address: generalutilities@AOL.com					
3.	Water Treatment Plant	Information	,				
	Plant Name: Lake Yak	ce			P	lant Telephone Numbe	r: 352-589-9212
	Plant Address: 11643	Martel Court		City: Leesburg	S	tate: Florida	Zip Code: 34788
	Type of Water Treated	l by Plant: 🛛 Raw Ground Water 🔲 Pu	rchased Finished \	Water			
	Permitted Maximum D	Day Operating Capacity of Plant, gallons per day:	468,000				
	Plant Category (per su	bsection 62-699.310(4), F.A.C.): V			ibsection 62-6	599.310(4), F.A.C.): D	
	Licensed Operators	Name 1	License Class	License Number		Day(s)/Shift(s)	Worked
	Lead/Chief Operator:	T. Felton	С	0002241		Varies	
	Other Operators:	D. Harris	A	0014540		Varies	
		K. Ramsood	С	0015224		Varies	
		T. Levi	С	0012911		Varies	
			·				
		D. Longfellow	С	0017972		Varies	
		T. Hill	С	0024143		Varies	
	Cartification by Logo	d/Chief Operator	oracionale a Francisco de Cala				
		eatment plant operator licensed in Florida, am the	lead/chief operato	r of the water treat	nent nlant ider	ntified in Part I of this r	enort I certify that the
		is report is true and accurate to the best of my kno					
		d 60 or other applicable standards referenced in su					
		lay that a licensed operator staffed or visited this					
		appropriate treatment process performance recor					
		ether with copies of this report, at a convenient lo				· operanono recoras to	
		.,,		,			
		3/1/19 Thomas	M. Felton			0002241	
Sio	nature and Date		or Typed Name			License Numb	ner
- 5		Timod	or rypoditumo			Disciso runic	
	- /		D 1				
EΡ	Form 62-555.900(3)Alternate		Page 1				

PWS	Identifi	cation No	umber: 335	4688		Plant Na	me: LAK	E YA	LE					
III.	Daily Da	ata for th	ne Month/Y	ear of	FEB	/ 2019	· · · · · · · · · · · · · · · · · · ·							
Mean	ns of Act	nieving F	our-Log Vi	rus Inactivati	on/Removal: *		Chlorine		Chlorine	Dioxide		Ozone	Combin	ned Chlorine (Chloramines)
		t Radiati		Other (Descril										
Туре	of Disin	fectant R	Residual Ma	intained in D	istribution Syst	tem:	Free Chl	orine	ПСо	mbined C	hlorine (Chlorami	ines)	Chlorine Dioxide
		l			T Calculations, or							<u> </u>		
	Days					CT Calcu					*, *	Dose	1	
	Plant						Lowest CT	T					Lowest	
	Staffed				Lowest Residual	Disinfectant	Provided	1					Residual	
	or			,	Disinfectant	Contact Time							Disinfectant	
	Visited				Concentration	(T) at C	at First		-		Lowest	Minimum	Concentration	
	by		Net Quantity	/]	(C) Before or at	Measurement	Customer	Temp.		Minimum	Operating		at Remote	Emergency or Abnormal Operating
Day o		Hours	of Finished		First Customer	Point During	During	of	pH of	СТ	UV Dose,		Point in	Conditions; Repair or Maintenance Work that
the	(Place	Plant in	Water	Peak Flow	During Peak	Peak Flow,	Peak Flow,		Water, if	Required,		mW-	Distribution	Involves Taking Water System Components
Month	(X)		Produced, ga		Flow, mg/L	minutes	mg-min/L	_°C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/L	Out of Operation
1 2	 	24	700		-		ļ		_	<u> </u>	ļ		0.4	
3	 	24	1900					ļ		ļ	ļ			
4		24	39 00	0			·	ļ	ļ		<u> </u>		0.4	•
5		24	4700				-	ļ	ļ				0.5	
6	//-	24	3100					ļ					0.5	
7	 	24	1400					 -	ļ				0.5	
8		24	1 00					<u> </u>		<u> </u>			0.5	
9	 	24	7 000			 	·	-		<u> </u>			0.5	
10	-	24	3700		<u> </u>			ļ		<u> </u>			0.7	
11		24			,	<u> </u>	 -			ļ			6.7	
12	1	24	3800		<u> </u>					ļ			0-7	
13	/	24	7 000							 	 		0-6	
14	/	24	25000			-			 -	·			0.7	
15	1	24	2 000					ļ	 -	ļ <u>.</u>	ļ	<u> </u>		
16		24	14 000				<u> </u>			 	ļ	ļ	0.6	· i
17	7	24	15 000						 	ļ	ļ	<u> </u>	0-6	BACT
18	-	24	6 (000		 					 		<u> </u>	0.7	BACI
19	1	24	2,3 000				 	 		<u> </u>			0.7	
20	-	24	1 8 000					 	 				0.7	
21		24	34 000					 					0.7	•
22		24	13 000										0.7	
23		24	29 000							 			0.1	
24		24	29000		,					 			0.7	
25		24	6 000							 			0.7	
26	1	24	29 000							 			0.7	
27		24	23 000							 			8.7	
28		24	16000										0.7	
			000					 					0.1	
			000					<u> </u>			 	 		
			000					l	 		 			
Total			677000		1				L.,	·	1			<u> </u>
Averag	e		24000											

^{*} Refer to the instructions for this report to determine which plants must provide this information.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Lake Yale Utilities LLC

18700 W 10 Mile Rd

Southfield, MI 48075

Lake Yale Estates WWTF

37802 County Road 452

Lccsburg, FL 34788

PERMIT NUMBER:

FLA010547

REPORT:

Monthly

FACILITY TYPE:

LIMIT:

FINAL DW

Domestic

MONITORING GROUP: R-001

DESCRIPTION:

Rapid Infiltration Basin, including Influent

GROUP:

LOCATION:

ADDRESS:

FACILITY:

COUNTY: LAKE						MONI	TORING PERIO	DD: From: 02/	/01/2019 To	: 02/28/2019	<u></u>
Parameter		Quantity	or Loading	Units	Quali	ty or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		0.007						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 Y Mon. Site: FLW-1	Permit Requirement		0.055 (Annl Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement		0.014						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 1 Mon. Site: FLW-1	Permit Requirement		Report (Mo Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
BOD, Carbonaceous 5 day, 20C	Sample Measurement	:				8.8			0	1 Monthly	Grab
PARM Code 80082 Y Mon. Site: EFA-1	Permit Requirement					20.0 (Anni Avg)		mg/L		(1 Monthly)	(Grab)
BOD, Carbonaceous 5 day, 20C	Sample Measurement	-144			9.0	9.0	9.0		0	1 Monthly	Grab
PARM Code 80082 A Mon. Site: EFA-1	Permit Requirement	9.			60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Monthly)	(Grab)

Parameter		Quantity or	Loading	Units	Quali	ty or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement					2.6			0	1 Monthly	Grab
PARM Code 00530 Y Mon. Site: EFA-1	Permit Requirement					20.0 (Anni Avg)		mg/L		(1 Monthly)	(Grab)
Solids, Total Suspended	Sample Measurement				3.0	3.0	3.0		0	1 Monthly	Grab
PARM Code 00530 A Mon. Site: EFA-1	Permit Requirement				60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Monthly)	(Grab
Coliform, Fecal	Sample Measurement					4			0	1 Monthly	Grab
PARM Code 74055 Y Mon. Site: EFA-1	Permit Requirement					200.0 (Annl Avg)		#/100mL		(1 Monthly)	(Grab
Coliform, Fecal	Sample Measurement					12	12		0	1 Monthly	Grab
PARM Code 74055 A Mon. Site: EFA-1	Permit Requirement					200.0 (Mo Geomn)	800.0 (Maximum)	#/100mL		(1 Monthly)	(Grab
pH	Sample Measurement				7.3		7.4		0	5 Days/Week	Grab
PARM Code 00400 A Mon. Site: EFA-1	Permit Requirement				6.0 (Minimum)		8.5 (Maximum)	s.u.		(5 Days/Week)	(Grat

-

Parameter		Quantity (or Loading	Units	Quali	ty or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Chlorine, Total Residual	Sample Measurement				1.6				0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site: EFA-1	Permit Requirement				0.5 (Minimum)			mg/L		(5 Days/Week)	(Grab)
Nitrogen, Total	Sample Measurement					17.1			0	1 Monthly	Grab
PARM Code 00600 Y Mon. Site: EFA-1	Permit Requirement		:			Report (Annl Avg)		mg/L	:	(1 Monthly)	(Grab)
Nitrogen, Total	Sample Measurement						18.6		0	1 Monthly	Grab
PARM Code 00600 A Mon. Site: EFA-1	Permit Requirement						Report (Mo Avg)	mg/L		(1 Monthly)	(Grab)
Phosphorus, Total (as P)	Sample Measurement	·				3.5			0	1 Monthly	Grab
PARM Code 00665 Y Mon. Site: EFA-1	Permit Requirement					Report (Annl Avg)		mg/L		(1 Monthly)	(Grab)
Phosphorus, Total (as P)	Sample Measurement						6.1		0	1 Monthly	Grab
PARM Code 00665 A Mon. Site: EFA-1	Permit Requirement						Report (Mo Avg)	mg/L		(1 Monthly)	(Grab)

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Lake Yale Utilities LLC

ADDRESS:

18700 W 10 Mile Rd

Southfield, MI 48075

PERMIT NUMBER:

MONITORING GROUP: RMP-Q

FLA010547

FINAL REPORT: Monthly

FACILITY TYPE:

LIMIT:

DW

GROUP: Domestic

FACILITY:

Lake Yale Estates WWTF

LOCATION:

37802 County Road 452

Lecsburg, FL 34788

DESCRIPTION:

Biosolids Quantity

COUNTY:

LAKE

COUNTY: LAKE						MONITORIN	G PERIOD: Fi	rom: 02/01/2019	9 To: 02/28	/2019	
Parameter		Quantity	or Loading	Units	Quali	ty or Concen	tration	Units	No. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Transferred)	Sample Measurement		0						0	1 Monthly	Calculated
PARM Code B0007 + Mon. Site: RMP-1	Permit Requirement		Report (Mo Total)	dry tons						(1 Monthly)	(Calculated)
Biosolids Quantity (Landfilled)	Sample Measurement		0						0	1 Monthly	Calculated
PARM Code B0008 + Mon. Site: RMP-1	Permit Requirement		Report (Mo Total)	dry tons						(1 Monthly)	(Calculated)
Thomas M. Felton P	CERTIFY UNDER PENALT IRECTION OR SUPERVISION OR SUPERVISION OR SUPERVISION OF THE PROPERTY OF THE PENALT OR SUPERVISION SUBMITHE INFORMATION SUBMITHER OSSIBILITY OF FINE AND IN	ON IN ACCORDAI DEVALUATED THE SE SYSTEM, OR THE TTED IS, TO THE ARE SIGNIFICA	NCE WITH A SYS' HE INFORMATION IOSE PERSONS DII HEST OF MY KNO' NT PENALTIES F	TEM DESIGNED TO SUBMITTED, BAS RECTLY RESPONSI WLEDGE AND BEL OR SUBMITTING	D ASSURE THAT ED ON MY INQU BLE FOR GATHE JEF, TRUE, ACC	`QUALIFIED PERS JIRY OF THE PERS RING THE INFORM JIRATE AND COMI	SONNEL OR AUTI SON OR MATION, Electronic PLETE, I	HORIZED AGENT	L EXECUTIVI	OFFICER TELEPHONE (352) 787-2493	SUBMITTED ON 03/07/2019

Parameter		Quantity o	r Loading	Units	Qualit	y or Concent	ration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		0.007						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 P Mon. Site: FLW-1	Permit Requirement		0.055 (Annl Avg)	MGD	·			:		(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement	0.011	0.014						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 Q Mon. Site: FLW-1	Permit Requirement	Report (Qrtr Avg)	Report (Mo Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						21		0	1 Monthly	Calculated
PARM Code 00180 1 Mon. Site: FLW-1	Permit Requirement						Report (Mo Avg)	percent		(1 Monthly)	(Calculated)
Thomas M. Felton P T	CERTIFY UNDER PENALT IRECTION OR SUPERVISION OR SUPERVISION OR SUPERVISION OF THE PERVISION SUBMIT OF THE AND IT IS THE AND IT OF THE AND IT O	ON IN ACCORDAN DEVALUATED TH IE SYSTEM, OR TH ITED IS, TO THE E ARE SIGNIFICAN	ICE WITH A SYST IE INFORMATION IOSE PERSONS DIE BEST OF MY KNOT NT PENALTIES F	FEM DESIGNED T SUBMITTED, BAS RECTLY RESPONS WLEDGE AND BE OR SUBMITTING	O ASSURE THAT SED ON MY INQU IBLE FOR GATHER LIEF, TRUE, ACCL	QUALIFIED PERS VIRY OF THE PERS RING THE INFORM VIRATE AND COMI	SONNEL OR AUTI SON OR IATION, Electronic PLETE. I	IORIZED AGENT	EXECUTIVE	(352) 787-2493	SUBMITTED ON 03/07/2019

DAILY SAMPLE RESULTS - PART B Facility: Lake Yale Estates WWTF

Permit Number: Monitoring Period

FLA010547-004-DW3P From: 1+EB

2019

through: **28 FEB** 2019

Permit Exp. 29-May-2027

l	Carbonaceous	Solids, Total Suspended	Coliform, Fecal	Chlorine, Total	pH s.u.	Flow (Flow thru plant)	Nitrogen, Total	Phosphorus, Total (as P)	Nitrate (as N) annually	BOD, Carbonaceous	Solids, Total
ļ	5 day, 20C monthly	monthly max: 60	#/100mL monthly	Residual mg/L	5 days/wk range:	X 1000 permitted:	ing/L inonthly	mg/L monthly	max: 12 mg/L	5 day, 20C	Suspended ing/L
	max: 60 mg/L	mg/L	max: 200 #/100mL	5 days/wk min: 0.5	(6.0-8.5)	55,000 gal	inonthiy	Holling	JAN	mg/L annually JAN	annually JAN
Code	80082	00530	74055	50060	00400	50050	00600	00665	00620	80082	05530
Mon. Site	EFA-I	EFA-I	EFA-1	EFA-I	EFA-1	FLW-I	EFA-1	EFA-I	EFA-I	INF-I	INF-1
1				2.0	7.4	9					
2						1)					
3				2.1	7.4	+1		ļ			
4				2.2	7.3	23					
5				2.2	7.3	26					
6				2.2	7-3	8					
7				22	7-3	19	18.6	6.1			
8				2.2	7.3	8					
9				٧.٤	7.3	4					
10				2.ス	7.3	23					
11				2.3	7.3	26					
12				2.2	7.3	25					
13	9.0	3.0	12	<u> </u>	7-3	11					·
14				2.2	7.3	18					
15				ンン	7.3	12					
16				2.ユ	7.3	20					
17				2.3	7-3	20					
18				スル	7.3	21					
19				1.6	7-4	16					
20			. ,	1.8	7.4	14					
21				1-8	7.4	26					
22				2.0	7.4	9					
23						9					
24				1.9	7-4	9					
25				√ .≻	7.4	5					
26				2.7	7.4	5					
27				2.2	7.4	٧,					
28				2.2	7.4	3					
29											
30											
31						4					
Total					ì	397					
Mo. Avg.	9.0	3.0	12			14	18.6	6-1			

PLANT STAFFING:						
Day Shift Operator	Class:	<u>A</u>	Certificate No:	0014107	Name:	D. Harris
Evening Shift Operator	Class:	С	Certificate No:	0012637	Name:	T. Levi
Night Shift Operator	Class:	С	Certificate No:	0023328	Name:	T. Hill
Lead Operator	Class:	С	Certificate No:	0002817	Name:	T. Felton

Tri-Tech Laboratories, Inc. 4403 Vineland Road Suite 8-12 Orlando, Fl 32811

Phone 407-422-4667 Fax 407-422-4668

Carrange and Carra

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME Lake Yale

Final Report

DATE REC	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
02/13/19	19-02-301-1	02/13/19 1150	CBOD TSS Effluent	SM 5210B SM2540D		mg/L mg/L	* 02/16/19 0900	DB DB
02/13/19	19-02-301-2	02/13/19 1150	Fecal Coliform Effluent	SM 9222D	12	Cfu's/100mls	02/13/19 1640	DB

*CBOD

Date & Time Setup: 02/13/19 1745 Date & Time Read: 02/18/19 1600

U - Material was analyzed for but not detected;
The value reported is the minimum detection limit.

0.16 grams of TCMP was added for CBOD analysis as nitrification inhibitor.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable. This report shall not be reproduced except in full without the written approval from the laboratory.

Reviewed By : Tamara Zas

Title : Quality Control Director

Date Reviewed: Feb 20, 2019

02/07/19 16:53

02/07/19 08:40 02/08/19 13:29 7723-14-0



ANALYTICAL RESULTS

Project:

Lake Yale

Pace Project No.:

Nitrogen, NO2 plus NO3

365.4 Phosphorus, Total Phosphorus, Total (as P)

Date: 02/11/2019 05:42 PM

35446229

Sample: WW Effluent-LY	Lab ID:	35446229001	Collected	d: 02/06/19	09:21	Received: 02/	06/19 16:15 Ma	atrix: Water	
Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
Total Nitrogen Calculation	Analytical	Method: TKN+I	NOx Calcul	ation					
Total Nitrogen	18.6	mg/L	0.50	0.086	1		02/11/19 17:39		
351.2 Total Kjeldahl Nitrogen	Analytical	Method: EPA 3	51.2 Prepa	ration Meth	od: EP	A 351.2			
Nitrogen, Kjeldahl, Total	0.086 U	mg/L	0.50	0.086	1	02/07/19 08:40	02/08/19 13:29	7727-37-9	J(M1)
353.2 Nitrogen, NO2/NO3 pres.	Analytical	Method: EPA 3	53.2						

0.25

0.10

Analytical Method: EPA 365.4 Preparation Method: EPA 365.4

18.6

6.1

mg/L

mg/L

0.12

0.050

5



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

A PROPERTY CONTROL OF THE STATE	·······			
	TT / 2019			
A. Public Water System (PWS) Information				
PWS Name: Lake Yale			PWS Identification N	umber: 3354688
PWS Type:		t Non-Community	Consecutive	
Number of Service Connections at End of Month: 58		Total Population Ser	ved at End of Month: 101	
PWS Owner: Lake Yale Utility Company, 11643 Martel Court				-
Contact Person: T. Felton		Contact Person's Tit		
Contact Person's Mailing Address: P.O. Box 491221		City: Leesburg	State: Florida	a Zip Code: 34749-1221
Contact Person's Telephone Number: 352-787-2493		Contact Person's Fax	Number: 352-326-8756	
Contact Person's E-Mail Address: generalutilities@AOL.com				
3. Water Treatment Plant Information			• .	
Plant Name: Lake Yake			Plant Telephone Num	ber: 352-589-9212
Plant Address: 11643 Martel Court		City: Leesburg	State: Florida	Zip Code: 34788
Type of Water Treated by Plant:	Purchased Finished W	ater		
Permitted Maximum Day Operating Capacity of Plant, gallons	per day: 468,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V	,	Plant Class (per subs	section 62-699.310(4), F.A.C.):	D
		License Number	Day(s)/Shift	
Tead/Chief Operator: T. Felton	С	0002241	Var	
Other Operators D. Harris	A	0014540	· Var	ics
K. Ramsood	C	0015224	· Var	ics
T. Levi	С	0012911	Var	ics
T. Hill	C	0024143	· Var	ies
D. Longfellow	C	0017972	Var	ies
T. Haught	С	0025043	Var	ies
II. Certification by Lead/Chief Operator				
, the undersigned water treatment plant operator licensed in Florid	am the lead/object assets	C of		
information provided in this report is true and accurate to the best of	a, and the read/chief operator	I costificate all discontinuo	nt plant identified in Part I of th	is report. I certify that the
NSF International Standard 60 or other applicable standards referen	or my knowledge and belief.	1 certify that all drin	king water treatment chemicals	used at this plant conform to
plant were prepared each day that a licensed operator staffed or visitation and (2) if applicable	ited this plant during the	oth indicated abarres	(1) records of account of the	nal operations records for this
ates; and (2) if applicable, appropriate treatment process performa	nce records. Findbanacant	im muicaled above:	(1) records of amounts of chemi	cais used and chemical feed •
wner can retain them, together with copies of this report, at a conv	tenient location for at least to	agree to brovide thes	e additional operations records	to the PWS owner so the PWS
A STATE OF THE STA	omone togation not at least te	ii Acqiz		
10/1/19	Thomas M. Felton		0000011	
Signature and Date		· · · · · · · · · · · · · · · · · · ·	0002241	
organitute distribute	Printed or Typed Name		License Nu	mber

Page 1

The Daily Data for the Month/Year of Sept 2019 Canbined Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)	PWS	PWS Identification Number: 3354688 Plant Name: LAKE YALE													
Means of Achieving Four-Log Virus Inactivation/Removal: * Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)	III.	Daily Da	nta for th	e Month/Ye	ar of	SEPT	2019								
Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide								Chlorine	Г	Chlorine	Dioxide	П	Dzone	Combin	ed Chlorine (Chloramines)
Days Plant Staffed or Visited by Net Quantity Open of Plant in the (Place by 1) A visit Plant	🔲 U	ltraviole	t Radiati	on 🔲 Ot	her (Describ	pe):			<u></u>	,					· · · · · · · · · · · · · · · · · · ·
Days Plant Staffed Or Produced Plant in Water Month "X") Operation Produced, gal A Operation Produced, gal Operation Produced, gal Operation Operation Operation Operation Operation	Туре	of Disin	fectant R	esidual Mair				Free Chl	orine	Coi	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
Plant Staffed Staffe					C	T Calculations, or			our-Log	Virus Inactiv	vation, if A				
Staffed or or or or or visited by Visited						T	CT Calcul		<u> </u>		T	UV	Dose		
Or Visigo Pay Pa						Lowest Residual	Disinfectant								
Day of Operator the (Place Plant in Water Produced, gal Nate, great of the (Place Plant in Water) Plant in Water Produced, gal Nate, great of the (Place Plant in Water) Plant in Water Produced, gal Nate, great of the		1].									1		
Day of Operator Hours Operation Hours Operation Power Plant in Water Plant in Water Plant in Water Operation Produced, gal Rate, gpd Plant in				l			, ,							Concentration	
The the thing Plant in Water Peak Flow During Peak Peak Flow minutes Peak Flow Peak Flow minutes Peak Flow minutes Peak Flow Peak Flow minutes Peak Flow minutes Peak Flow	Do., of		11								I .	Operating	UV Dose		
Month "X" Opention Produced, gal Rate, gpd Flow, mg/L minutes mg-min/L °C Applicable mg-min/L sec/cm² sec/cm² System, mg/L Out of Opention		(Place	I .		Peak Flow				1		1 -				
1	1		1	1 1							me-min/I			ľ	
3	1		24	18 000						1.10/1.01.01.0	1	, peer en	300/0111	bystem, mg/L	Out of Operation
3														0.4	
5											•			0. Ÿ	
6	I														
7														0.2	
8														0.4	
10	- 8	/												0.<	
10															
12															
13				40 000										0.2	
14 24 23 000 0.4 15 24 23 000 0.5 16 24 3 000 0.4 17 24 3 000 0.4 18 24 3 000 0.5 19 24 2 000 0.2 20 24 3 000 0.2 21 24 3 000 0.2 22 24 3 000 0.2 23 24 1 000 0.2 24 24 0.00 0.2 25 24 3 000 0.5 26 24 3 000 0.5 27 24 4 000 0.5 27 24 4 000 0.5 28 24 2 000 0.5 28 24 2 000 0.5			·	95 000											6
15				2 3 000							ļ			0.4	
16		レ				-					 		ļ	7 2	,
18	16	ン	24	37 000											
18				39 000											
19															
21														0.3	
22				13 000										0.2	
23														7	
24															
26	24													0.4	
20								1						0.5	
27 V 24 (C 000 28 24 2 000 29 (24 2 000				16 000									·	0.4	
		_ <i>V</i>			·	·									
		1/													
20 10 10 10 10 10 10 10 10 10 10 10 10 10											ļ			_/· ŏ	
30 24 (2.000)				1 6 300										1.0	
Total (6/9 000				669 000		·		<u></u> .							

Average 22,000

Maximum 45 000

* Refer to the instructions for this report to determine which plants must provide this information.



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See page 4 for instructions.

	General Information for the Month/Year of:	/2010			
Ā.	Public Water System (PWS) Information	7/2019			
	PWS Name: Sandpiper			DATE TO THE TOTAL	
	PWS Type: Community Non-Transient Nor	Community Trans	ent Non-Community	PWS Identification N	amber: 3351115
	Number of Service Connections at End of Month: 150	il-Collinainty [11alis]		Consecutive	
	PWS Owner: Lake Yale Utility Company, 11643 Martel Cou	rt Leesburg El 24700	Total Population Ser	ved at End of Month: 270	
	Contact Person: T. Felton	it, Leesburg, FL 34/88	Control Day 1 Til		•
	Contact Person's Mailing Address: P.O. Box 491221		City I cookers		
	Contact Person's Telephone Number: 352-787-2493		City: Leesburg	State: Florida	Zip Code: 34749-1221
	Contact Person's E-Mail Address: generalutilities@AOL.com	1	Contact Person's Pax	Number: 352-326-8756	
В.	Water Treatment Plant Information				
	Plant Name: Sandpiper			Di- ATL 1 N	
	Plant Address: C R 452		City: Leesburg	Plant Telephone Numb	
	Type of Water Treated by Plant: Raw Ground Water	Purchased Finished	Weter	State: Florida	Zip Code: 34788
	Permitted Maximum Day Operating Capacity of Plant, gallon	s per day: 162 000	w alei		
	Plant Category (per subsection 62-699 310(4) F & C \) V		Diant Class (non-1		
	Licensed:Operators Name	license Class	License Number	ection 62-699.310(4), F.A.C.): I	
	Lead/ChiefiOperator T. Felion	C C	0002241	The second of th	s) Worked
	Other Operators: D. Harris	A	0002241	Vario	
	K. Ramsood	- C	 	Varie	
	T. Levi	C	0015224	Varie	S
	T. Hill	· C	0012911	Vario	s
	D. Longfellow	C	0024143	Varie	s
	T.Haught	C	0017972	Vario	S
			0025043	Varie	8
	• - 1 4 3.	- 			
877	COURSE ST. 1. S.				
T +1	Certification by Lead/Chief Operator	其的,1980年在1980年中的美国			
١, ١,	to undersigned water treatment plant operator licensed in Florid	dia tanàna ao amin'ny faritr'i North ao amin'ny faritr'i North ao amin'ny faritr'i North ao amin'ny faritr'i N	or of the water treatment	plant identified in Part Lof this	report Leavis de La
MIC.	ormation provided in this report is true and accurate to the best of International Standard 60 or other applicable standards refere	of my knowledge and belief	. I certify that all drink	ne water treatment chemicals w	sed at this plant and
Dlar	F International Standard 60 or other applicable standards referent were prepared each day that a licensed operator staffed or vis	enced in subsection 62-555.3	320(3), F.A.C. I also ce	rtify that the following addition	al operations records for this
rate	nt were prepared each day that a licensed operator staffed or vises; and (2) if applicable, appropriate treatment process performa	sited this plant during the mo	onth indicated above: (1) records of amounts of chemic	als used and chamical fact
Own	es; and (2) if applicable, appropriate treatment process performation can retain them; together with copies of this report, at a con-	ance records. Furthermore,	l agree to provide these	additional operations records to	othe PWC ourses as the DWC
OWI	ner can retain them; together with copies of this report, at a con-	venient location for at least t	en years.		Strict wo owiter so the L M2
			rating and the second of the s		
Cir	10/1/19	Thomas M. Felton		0002241	
Sigi	nature and Date	Printed or Typed Name		License Nun	lha
				Picetise Mill	IUCT

Page 1

PWS	PWS Identification Number: 3351115 Plant Name: SANDPIPER													
TT.	H. Daily Data for the Month/Year of: SEPT / 2019													
					on/Removal: *	/ 2019			7					
U	ltraviole	t Radiati	on 🗌 Ot	her (Describ	oe):	_	Chlorine	L] Chlorine	Dioxide	Ц	Ozone	∐ Combi	ned Chlorine (Chloramines)
Type	of Disin	fectant R	Residual Mair	ntained in D	istribution Syst	tem: 🔀	Free Chl	orine	☐ Coi	mbined C	hlorine (Chlorami	nes)	Chlorine Dioxide
				C'	T Calculations, or	UV Dose, to De	monstrate F	our-Log	Virus Inactiv	vation, if A	pplicable*			- Carolino Dioxido
	Days					CT Calcul	ations					Dose	ĺ	
	Plant Staffed						Lowest CT						Lowest	
	or]		Lowest Residual		Provided					İ	Residual	
	Visited		}		Disinfectant Concentration	Contact Time	Before or				_		Disinfectant	
	by		Net Quantity		(C) Before or at	(T) at C Measurement	at First Customer	Toma				Minimum		
Day of	Operator	Hours	of Finished		First Customer	Point During	During	Temp.	pH of	Minimum CT	Operating	Required,	at Remote	Emergency or Abnormal Operating
the	(Place	Plant in	Water	Pcak Flow	During Peak	Peak Flow.	Peak Flow,	Water,		Required,	mW-	mW-	Point in Distribution	Conditions; Repair or Maintenance Work that Involves Taking Water System Components
Month	"X")		Produced, gal	Rate, gpd	Flow, mg/L	minutes	mg-min/L	°C	Applicable	mg-min/L	sec/cm ²	sec/cm ²	System, mg/I	
1		24	000							8			0.4	- Out of Operation
3		24	000										0.3	
4	\ <u>\</u>	24 24	000										0.4	
5		24	000		`								0.5	
6		24	000				·						5.4	
7		24	000										0.5	
8	1/	24	000											
9	1	24	000										0.8	
10	/	24	000					ļ				····	0.7	
11	/	24	000										0.7	
12		24	000										<u>0.2</u>	0.40#
13	/	24	000										<u>0.5</u>	BACT
14		24	000										0.6	
15 16	-V-	24	000										0.7	
17		24	000										0.7	
18	V,	24 24	000										0.5	
19		24	000										6.2	
20		24	000										0.2	
21		24	000										0.2	
22	1/	24	000											
23	1	24	000										0.4	
24		24	. 000		· .								0.5	
25	/	24	000										0.5	
26	/	24	000				•						0.4	
27		24	000										0.6	
28		24	000		_								0.5	
29		24	000										A 4	
30		. 24	000							·			0.4	
 Γotal			000										<i>U.</i> 7	
Average			000									I		
Maxim			000											
- June 11111			000											

Maximum

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Lake Yale Utilities LLC ADDRESS:

18700 W 10 Mile Rd

Southfield, MI 48075

PERMIT NUMBER: LIMIT:

DESCRIPTION:

FLA010547 FINAL

REPORT: GROUP:

Monthly Domestic

MONITORING GROUP: R-001

FACILITY TYPE: DW

Rapid Infiltration Basin, including Influent

FACILITY: LOCATION:

Lake Yale Estates WWTF 37802 County Road 452

Leesburg, FL 34788

COUNTY:

LAKE

MONITORING PERIOD: From: 09/01/2019 To: 09/30/2019

COUNTY: LAKE				MONITORING PERIOD: From: 09/01/2019 To: 09/30/2019								
Parameter		Quantity or Loading	Units	Quali	Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type		
Flow	Sample Measurement	0.006						0	5 Days/Week	Recording Flow Meter with Totalizer		
PARM Code 50050 Y Mon. Site: FLW-1	Permit Requirement	0.055 (Anni Av	g) MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)		
Flow	Sample Measurement	0.003						0	5 Days/Week	Recording Flow Meter with Totalizer		
PARM Code 50050 1 Mon. Site: FLW-1	Permit Requirement	Report (Mo Avg							(5 Days/Week)	(Recording Flow Meter with Totalizer)		
BOD, Carbonaceous 5 day, 20C	Sample Measurement				8.6			0	1 Monthly	Grab		
PARM Code 80082 Y Mon. Site: EFA-1	Permit Requirement				20.0 (Annl Avg)		mg/L		(1 Monthly)	(Grab)		
BOD, Carbonaceous 5 day, 20C	Sample Measurement			8.0	8.0	8.0		0	1 Monthly	Grab		
PARM Code 80082 A Mon. Site: EFA-1	Permit Requirement			60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Mo Avg)	mg/L		(1 Monthly)	(Grab)		

Parameter		Quantity or Loading	Units	Quali	ty or Concent	tration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement				2.6			0	1 Monthly	Grab
PARM Code 00530 Y Mon. Site: EFA-1	Permit Requirement				20.0 (Anni Avg)		mg/L	,	(1 Monthly)	(Grab)
Solids, Total Suspended	Sample Measurement			2.0	2.0	2.0		0	1 Monthly	Grab
PARM Code 00530 A Mon. Site: EFA-1	Permit Requirement			60.0 (Maximum)	45.0 (Wkły Avg)	30.0 (Mo Avg)	mg/L		(1 Monthly)	(Grab)
Coliform, Fecal	Sample Measurement				5			0	1 Monthly	Grab
PARM Code 74055 Y Mon. Site: EFA-1	Permit Requirement				200.0 (Anni Avg)		#/100mL		(1 Monthly)	(Grab)
Coliform, Fecal	Sample Measurement				9	9		0	1 Monthly	Grab
PARM Code 74055 A Mon. Site: EFA-1	Permit Requirement				200.0 (Mo Geomn)	800.0 (Maximum)	#/100mL		(1 Monthly)	(Grab)
рН	Sample Measurement			7.3		7.4		0	5 Days/Week	Grab
PARM Code 00400 A Mon. Site: EFA-1	Permit Requirement			6.0 (Minimum)		8.5 (Maximum)	s.u.		(5 Days/Week)	(Grab)

Parameter		Quantity	or Loading	Units	Quali	Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
Chlorine, Total Residual	Sample Measurement				1.0				0	5 Days/Week	Grab
PARM Code 50060 A Mon. Site: EFA-1	Permit Requirement				0.5 (Minimum)			mg/L		(5 Days/Week)	(Grab)
Nitrogen, Total	Sample Measurement					13.0			0	1 Monthly	Grab
PARM Code 00600 Y Mon. Site: EFA-1	Permit Requirement					Report (Annl Avg)		mg/L		(1 Monthly)	(Grab)
Nitrogen, Total	Sample Measurement						1.7		0	1 Monthly	Grab
PARM Code 00600 A Mon. Site: EFA-1	Permit Requirement						Report (Mo Avg)	mg/L		(1 Monthly)	(Grab)
Phosphorus, Total (as P)	Sample Measurement					2.7			0	1 Monthly	Grab
PARM Code 00665 Y Mon. Site: EFA-1	Permit Requirement					Report (Annl Avg)	·	mg/L		(1 Monthly)	(Grab)
Phosphorus, Total (as P)	Sample Measurement						0.4		0	1 Monthly	Grab
PARM Code 00665 A Mon. Site: EFA-1	Permit Requirement						Report (Mo Avg)	mg/L		(1 Monthly)	(Grab)

Parameter		Quantity o	or Loading	Units	Qualit	y or Concent	tration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement		0.006						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 P Mon. Site: FLW-1	Permit Requirement		0.055 (Anni Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement	0.004	0.003						0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 Q Mon. Site: FLW-1	Permit Requirement	Report (Qrtr Avg)	Report (Mo Avg)	MGD						(5 Days/Week)	(Recording Flow Meter with Totalizer)
Percent Capacity, (TMADF/Permitted Capacity) x 100	Sample Measurement						7		0	1 Monthly	Calculated
PARM Code 00180 1 Mon. Site: FLW-1	Permit Requirement						Report (Mo Avg)	percent		(1 Monthly)	(Calculated)
OR AUTHORIZED AGENT Thomas M. Felton T	DIRECTION OR SUPERVISION OF SUPERLY GATHERED AND PERSONS WHO MANAGE THE INFORMATION SUBMITMENT THERE	CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY ISIGNATURE OF PRINCIPAL EXECUTIVE OFFICER TELEPHONE IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL OR AUTHORIZED AGENT (OR AUTHORIZED AGENT) REPORT OF THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR RESONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, Electronically Signed (352) 787-2493 (10/03/HE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I M AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE DSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.								SUBMITTED ON 10/03/2019	

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: Lake Yale Utilities LLC PERMIT NUMBER: FLA010547 ADDRESS: 18700 W 10 Mile Rd LIMIT: FINAL REPORT: Monthly Southfield, MI 48075 **FACILITY TYPE:** DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Yale Estates WWTF LOCATION: 37802 County Road 452 **Biosolids Quantity** DESCRIPTION: Leesburg, FL 34788 COUNTY: LAKE MONITORING PERIOD: From: 09/01/2019 To: 09/30/2019 Frequency No. Sample Parameter **Ouantity or Loading** Units Quality or Concentration Units of Ex. Type Analysis Sample Biosolids Quantity (Transferred) 0.89 O 1 Monthly Calculated Measurement PARM Code B0007 + Permit Report (Calculated) dry tons (1 Monthly) Mon. Site: RMP-1 (Mo Total) Requirement Sample Biosolids Quantity (Landfilled) 0 0 Calculated 1 Monthly Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 Requirement (Mo Total) I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL OR AUTHORIZED AGENT PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WITHOUT PROPERTY OF THE INFORMATION SUBMITTED BASED ON MY INQUIRY OF THE PERSON OR THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, BELIEF, TRUE, ACCURATE AND COMPLETE. I NAME/TITLE PRINCIPAL EXECUTIVE OFFICER SUBMITTED ON OR AUTHORIZED AGENT Thomas M. Felton (352) 787-2493 10/03/2019

AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

DAILY SAMPLE RESULTS - PART B

Pennit Number: Monitoring Period

FLA010547-004-DW3P From: 1 3EPT

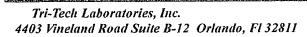
2019

through: 305EPT

Facility: Lake Yale Estates WWTF

Permit Exp. 29-May-2027

Œ										тин Бхр. 25	-1414y-202
1	BOD, Carbonaceous	Solids, Total Suspended		Chlorine,	pН	Flow (Flow	Nitrogen,		Nitrate (as N)	BOD,	Solids, Tota
ŀ	5 day, 20C	monthly	Fecal #/100mL	Total Residual	s.u. 5 days/wk	tluu plant) X 1000	Total mg/L	Total (as P) mg/L	annually max: 12 mg/L	Carbonaceous 5 day, 20C	Suspended mg/L
	monthly	max: 60	monthly	ing/L	range:	permitted:	monthly	monthly	max. 12 mg/L	mg/L	annually
	max: 60 mg/L	mg/L	max: 200 #/100mL	5 days/wk min: 0.5	(6.0-8.5)	55,000 gal				annually	
Code	80082	_00530			00400	500.50			JAN	JAN	JAN
Mon. Site	EFA-1	EFA-1	74055 EFA-1	50060 EFA-1	-00400 EFA-1	-50050 FLW-1	00600 EFA-1	00665 EFA-1	00620 EFA-1	80082 ···	05530
i		Dill I	DITE		 	·	EFA-1	EFA-I	EFA-1	INF-1	INF-1
2				1.8	7.4	_5_	-	<u> </u>			
3				1.8	7.4	5					
				1.6	7.4	- 5					
4				1.7	7.3	5	1.7	0.41			
5				1.8	7.4	4					
6 .				1.7	7.4	مي ا					
7						5					
8				1.8	7.4	م	 	<u> </u>			
9							ļ	ļ			<u> </u>
10				1.8	7.4	2	ļ				
	· · · · · · · · · · · · · · · · · · ·			1-7	7.4	2					
11				2.ス	7.4	7	·				
12	8.0	2.0	9	2.0	7.4	3					······································
13	٠.		***************************************	1.8	7.4	1					
14							<u> </u>				
15				1.9	72	- 1					
16					7.3	· 2					······································
17	·			1.0	7.4						
'				1-0	7.4	5					
18		·		2.2	7.4	1					
19				2.2	7.4	1					
20				2.2	7.4	ì					
21						ž					
22				25	7.4	3					·
23				2.2							
24		· ·		22	7.4	5					
				2.7	7-4						
25				2.2	7.4						
26				2,2	7.4	2					
27				2.2	7.4	1					
28						2					
29				2.0	7.4						
30						2	·				
31				2.0	7.4	3					
Total						93					
o. Avg.	3.0	₹.0	9			3	1.7	0.41			
									0 × 0 0	· O1	
ANT STAI		C!		ي سرد				Dry To	~s 0.8	ι	
y Shift Ope	•	Class:		Certificate No:	0014107	Na	ame: D.	Harris			
ening Shift	Operator	Class:	<u> </u>	Certificate No:	0012637	Na	ame: <u>T.</u>	Levi			
ght Shift O _l	perator	Class:	_C C	Certificate No:	0023328	N:	ame: T.	Hill			
ad Operator		Class:		ertificate No:					·		
Ороганог	•	Class.	(emicate No:	0002817	Na	ame: <u>T.</u>	Felton			



Phone 407-422-4667 Fax 407-422-4668

General Utilities Corp. 7261 Frog Log Ln Leesburg, Florida 34748 Attention: Mr T. Felton

PROJECT NAME Lake Yale

Final Report

DATE REC:	WORK ORDER:	DATE/TIME SAMPLED:	PARAMETER: SAMPLE ID:	METHOD:	RESULT	UNITS:	DATE/TIME ANALYZED:	TECH:
09/12/19	19-09-246-1		CBOD TSS Effluent	SM 5210B SM2540D	1	mg/L mg/L	* 09/18/19 0930	DB DB
09/12/19	19-09-246-2	102.12.12	Fecal Coliform Effluent	SM 9222D	9	cfu's/100mls	09/12/19 1600	DB

*CBOD

Date & Time Setup: 09/13/19 1000

Date & Time Read:09/18/19 0830

U - Material was analyzed for but not detected;
The value reported is the minimum detection limit.

0.16 grams of TCMP was added for CBOD analysis as nitrification inhibitor.

Test results contained in this package meet the requirement of the National Environmental Laboratory Accreditation Conference and/or state specific programs, as applicable. This report shall not be reproduced except in full without the written approval from the laboratory.

Reviewed By : Tamara Zal

Title : Quality Control Director

Date Reviewed: Sept 25, 2019



ANALYTICAL RESULTS

Project:

Lake Yale

Date: 09/10/2019 08:45 AM

Pace	Pro	ject N	No.:	35494693
Samn	le:	ww	Ffflue	ent-I Y

Sample: WW Effluent-LY	Lab ID:	35494693001	Collecte	d: 09/04/19	9 07:10	Received: 09/	/04/19 16:00 M	atrix: Water	
Parameters	Results	Units	PQL .	MDL	DF	Prepared	Analyzed	CAS No.	Qual
Total Nitrogen Calculation	Analytical	Method: TKN+N	NOx Calcul	ation					
Total Nitrogen	1.7	mg/L	0.50	0.086	1		09/10/19 08:43		
351.2 Total Kjeldahl Nitrogen	Analytical	Method: EPA 3	51.2 Prepa	ration Meth	od: EP	A 351.2			
Nitrogen, Kjeldahl, Total	0.086 U	mg/L	0.50	0.086	1	09/06/19 12:08	09/09/19 15:28	7727-37-9	
353.2 Nitrogen, NO2/NO3 pres.	Analytical	Method: EPA 35	53.2						
Nitrogen, NO2 plus NO3	1.7	mg/L	0.050	0.025	1		09/05/19 12:01		
365.4 Phosphorus, Total	Analytical	Method: EPA 36	65.4 Prepa	ration Meth	od: EP	A 365.4			
Phosphorus, Total (as P)	0.41	ma/L	0.10	0.050	1	09/06/19 12:08	09/09/19 15:28	7723-14-0	



4545 W Brown Deer Road Milwaukee WI 53223 PO Box 245036 Milwaukee WI 53224-9536 Phone: 800-876-3837 Fax: 888-371-5982

> Created Date 10-19-2020 Customer ID 00025883

To Mike Smallridge FLORIDA UTILITY

FLORIDA UTILITY SERVICES 1 5911 TROUBLE CREEK NEW PORT RICHEY Florida 34652

Effective Dates 10-19-2020 - 12-31-2021

Salesperson	Proposal Subject	Shipping Terms / INCO Terms	Payment Terms
007464 BRAD LOWE	3" E-Series Meter - Lake Yale	PREPAY/ADD TO INVOICE FCA FACTORY	NET 30 DAYS

Line #	Description	Qty	Unit Net Price USD	Line Totals USD
1	BMI Part No.: 101-1410 Description: EB - E-Series Ultrasonic Lead Free Brz Alloy (NSF-61-372), EFA - 3" ROUND (3 X 12) Potable, XX - None, X - NONE Encoder, CA - FOR CONNECTIVITY TO ORION, 1 - Standard, 9 Dial - 0.1 Gal, E - 1,000 E3 - BADGER STD (TS-461) Y2 - YR MFG 9D & PBB None, TF - TWIST TIGHT - 5 FT (MTR, ASSY) BOA - BADGER METER STANDARD (ID=B0A) Cat String: EB-EFA-PXXX-E5-CA-19BE-E3Y2-XXTF-XX-B0A	1	2,065.00	2,065.00

Subtotal - USD	2,065.00
Total Price - USD	2,065.00

Notes and Assumptions

If applicable, sales tax and freight, if included on the proposal, is an estimate and will be recalculated based on rates and tax status in effect at the time of invoicing.

Actual lead time to be provided at time of order.

To aid in processing your order, please include the Quote number on the PO that is submitted for this proposal.

Badger Meter provides certification files to help manage meter and endpoint inventory and to maintain meter accuracy data. The standard method of delivery for this format is via electronic mail. Any deviations from our standard format, or any custom file formats, will be considered on a time and material basis.

Due to continuous improvements and redesign of Badger Meter products and technology solutions, Badger Meter reserves the right to provide our newest product solutions as an alternative to the proposed products provided they are in conformance with the requirements of the specifications and do not exceed the prices quoted.

If you would like to place an order, please contact us at Utilityorders2@badgermeter.com or by calling 1-800-876-3837.

Thank you for your business!

This quotation is an offer made subject to the terms & conditions found on our website: www.badgermeter.com/Company/Legal/Sales-Terms.aspx Quoted prices are firm for acceptance, via an order, within the effective dates provided, shipping within 60 calendar days past the expiration of this quotation.

Sandpiper water and Sewer accounts – 190

Sandpiper Irrigation accounts - 22

Sandpiper Vacant accounts – 10

Lake Yale water and Sewer accounts -108

Lake Yale Irrigation accounts – 65

Lake Yale General account Clubhouse – 1

Lake Yale Vacant accounts - 11

Lake Yale Utilities LLC Staff's Second Data Request October 26, 2020

Invoices

14. Please refer to the invoices from Florida Utility Services dated October 31, 2019, in the amounts of \$32.05, \$98.20, and \$51.25. Please identify and explain what they were for and how they relate to materials and supply O&M expenses.

See attached Direct Expense Report and copies of receipts for expenses paid by Florida Utility Services and billed to Lake Yale Utilities on 10/31/2020.

10/19/2019 – Harbor Freight Tools, \$32.05, lithium grease, gloves and tarp

10/21/2019 – Ferguson Waterworks, \$98.20, pvc pipe

10/23/2019 – Home Depot, \$51.25, meter box, pvc parts

11:05 AM 10/20/20 Accrual Basis

Florida Utility Services 1, LLC Direct Expense Report October 2019

Date	Name	Memo	Amount
401 · Direct 401.03 · LYU Exp 10/21/2019 10/22/2019 10/23/2019 10/29/2019	pense Harbor Freight Ferguson Enterprises Home Depot Capital City Loan 6383	card 1773, LYU 620, lithium grease, gloves, tarp card 1773, LYU 620, 8" pvc caps card 7561, LYU 620, meter box, pvc parts Loan 6383, Invoice 10/29/19	32.05 98.20 51.25 90.93
Total 401.03 · LY	U Expense		272.43
Total 401 · Direct	·		272.43
rotal .			272.43

HARBOR FREIGHT TOOLS

BARTOW FL #00718 200 E VAN FLEET DR BARTOW, FL 33830 Telephone: (863) 519-0080

SALE

Customer Name: 6 Love Customer Number: 999005096764 69201 TARP SILVER H/D 8'4 X 11' 68511 9 MIL NITRILE GLOVES 50PC \$10.99 40711 140Z LITHIUM GREASE \$4.49 40711 1402 LITHIUM GREASE \$4.49 Subtotal \$29.96 Sales Tax 7.000% \$2.09 Total \$32.05 Debit \$32.05 Card No. XXXXXXXXXXXXXX1773 Auth. No. 571410 US DEBIT Chip Read Verified By PIN Mode: Issuer AID: A0000000980840 TVR: 8080045 0 IAD: 060106-3600000

Amount \$ 32.03

6 Love
999005096764

Utility Name

H/D 8'4 X 11' \$9.99
LE GLOVES 50PC \$10.99

1 GREASE \$4.49

Amount \$

\$ 32.03

LE GLOVE STORE
RECEIPT RECORD

Receipt Date

Rate Case? ______ NARUC_____ QB_____

Initials

Please Retain for Your Records

Store: 00718 Res: 02 Tran: 181646 Date: 10/19/2019 3:14:58 PM Assoc: XXXXXX

Ticket: 02181646

TSI: 6800 ARC: 00

Item(s) Sold: 4
Item(s) Returned: 0

BRITTNEY served you today.

83	F	E	R	GU	IS	OI	V®
				WAT	ERW	ORI	KS

OF WARRANTY.

CUSTOMER'S SIGNATURE:

FEI WINTER HAVEN, FL WATERWORKS #1588 2439 7TH ST SW WINTER HAVEN, FL 33880-1948

PACCEPT BYO = N "SHOWROOM - = M SOURCE = SOE ILE FRT = N 0.4TOR SHP = N 0.0 21 001 2019 07:43:0 WRITER SALESMAN

TERMS: CASH ON DEMAND

CUSTOMER COPY

CONTINUED

ORDER I	H: 863- No.	-401-276 REQUIRE	4 FA D DATE S	IX: 853-291- HIP WHS. SELL WH				CASH:	5 A L E : инн С	Contract to the second		ka in a		CEP TAG P.O. NO.	WIM
W070	240	10/21	/19	1588 158	8			ing and the second second		V 1/2					
CUSTON	MER NO.	CUSTOMER ALF	HA CONTE	RACT NO.	BID NO.	ORDER DATE	ORDERED BY		INSTRUC	TIONS	t jakan a		· · · · · · · · · · · · · · · · · · ·	OML CONTACT	
11944	. (Mao				10/21/19			****	H 26 26 26 36	06 H M M M M M	M 26 36 36 36 36 3	**********	Carlos Pag	checo :
									ALL	CASH S	ALES A	RE FI	VAL!!!	VENDOR	
		VT- WINT	ERHAVE	N O O	4 7 7 4 4 6	DUNTER PICK U			****	*******		******	******		
	SALES					L598			NO R	EFUNDS	OR EX	CHANGE	Sglil.	VENDOR P.O. NO.	
DWIN	ITER HA	VEN, FL	33881			139 7TH ST SW									
				in in paris	W)	CMTER HAVEN, I	L 33880-19	948	SHIP VIA	estra de la compa		a sasti		ROUTE NO.	RUN NO. DEPART
T					Ţ				CPU	COUNTE I BAGS - I I			IGTHS BUNDLES	ROUTE DESC.	
O . Alto	T 1731 1								1700	DAGS I	BUXES CI	HAIES LEN	IGINO BUNDLES	HOUTE DESC.	
	MER P.O. NO.		JOB NA	ME		ATTN:			SHIP WT.		SHIP DATE	l DE	LIVERED BY	PACKED BY	CHECKED BY
											on	15	$\langle I_{} \rangle$	N N	STILL STILL
LINE	ORDER QTY.	SHIP OTY		ITEM (CODE		DESCRIPTION			UNIT PRICE			TOTAL	P.O. NO.	AISLE LOC
1	2	/ 2		P40SCAPX		8 PVC \$40 St	OC CAP			458	90 EA		91.78		WS72
			<i>)</i>	AUTO A NOW YOU		The second district and the second se								4.1 1	
eren de este este este este este este este e	and the same	ſ	2502 AV 50 (8024) E	COLD THE R. P. LEWIS CO., THE SECOND SECTION OF THE PROPERTY O	Output programme the programme to the first term of the first term	<u>XXXXXXXXXX</u>	MO ETTIXXX	10/21/19	Harris Maranas de la Contra del Contra						
	gert Gran					te en en en en en en en en en en en en en			42.8	1,8,1 (5	4.4	G _{ER} (To detail
GSE STREET VI									Special telephone in the		Company of America	a constant of the		Average and the second	72 I
	<u>.</u>						(1.17 _{1.1} 5)			e de menos					
) Zazani kowana m akazara		andres and	144111 2 4 2				Service of the service of the service of
													ARVOLT .	70.4	
50 F. (18)	a Type of the			10000000000000000000000000000000000000		a prosentati kari 216	(10 july 10 july	ina Suna selen	44 97 31	Table Parities	(14) 705		ALE TO		190 300 300
															77 12 SOM HX 2015 2815 251
	And the			100	$T_{i}^{\mu}(t, t) = 0$	I KINGGO YA LATI	*******	arua ban	111000	M = M		14.4114			I Salle Shorts
								NAME OF THE PARTY							
				- FRANKY		10 - 17 - 17 - 17 - 17 - 17 - 17 - 17 -	A. M. D. L. H. Hel	44.76 C.J.44.	1,713,423,	44	344	14.0			
Seber Service et		a englisso verkelikennen i var	Sacration and State					En la la la la la la la la la la la la la	Name of Parison and Advanced to the Parison of the		6.33				
			all estates		1.1.11.11.1.1 _{.0}	S 27/HULLENG			1.541.41.4						61 - 62 - 46 - 46 - 46 - 46 - 46 - 46 - 46
97000 1000	*								To be the second of the		Visit of the second			STACEAR AND COLORS OF THE PROPERTY.	
								L≯Ch dNt		712, Y.S.					
								ar Lowers and					Page 1		
NO LE	TURNS ALLO	WED WITHOU	T PROPER	AUTHORIZATION. RETI		IS CUSTOVA	INBOUND	OUTBOUND			LESS				
SUB./E	CT TO HANDLII	NG CHARGES.				SUBTOTAL	FREIGHT	SHIPPING	TAX		POSIT	TO	TAL DUE		
SEE RE	VERSE SIDE I	FOR IMPORTAN	T TERMS AN	D CONDITIONS OF SAL	E AND LIMITATIO	NS 91.7	3 0.00	0.00	6.4	2 1 1	n.on	HA N	98.20		

Attach Receipt



More saving. More doing."

10825 U.S. HWY 441 LEESBURG, FL 34788 (352)742-1252

0278 00009 86638 10/23/19 11:41 AM CASHIER JOYCE

052063171135 VALVE BOX <A> 24.00 12" X 17" STD VALVE BOX BLK/GRN NDS 032888071346 PVC BALL VLV <A> 3.35 3/4" PVC BALL VALVE FPT SCH40 032888076341 PVC BALL VLV <A> 3/4" PVC BALL VALVE SLIP SCH40 202.98 5.96 046878377837 3/4" PVC-LOC <A> 4.11 3/4" PVC-LOCK SLIDE REPAIR FITTING 697285018730 3/4PVCXMAL <A> 10.47 3/4" SHARKBITE PVC X MALE ADAPT

SUBTOTAL 47.89
SALES TAX 3.36
TOTAL \$51.25

XXXXXXXXXXXXXXXXT561 DEBIT

AUTH CODE 681714 AID A0000000980840 USD\$ 51.25

US DEBIT

0278 09 86638 10/23/2019 6714

RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON
1 90 01/21/2020

Take a short survey for a chance TO WIN A \$5,000 HOME DEPOT GIFT CARD

Opine en español

www.homedepot.com/survey

User ID: HLL 173843 173574 PASSWORD: 19523 173565

Entries must be completed within 14 days of purchase. Entrants must be 18 or older to enter. See complete rules on website. No purchase necessary.

RECEIPT RECORD

Receipt Date	10-23-19	
Amount	\$ 51.25	
Utility Name	L.4.0	
Description	Meter box	
	and p.v.C.	ports.
	······································	
Rate Case?	NARUC	QB
		Initials

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

Invoice

	DATE	INVOICE #
	1/3/2019	330974
-		

Tele: 352-787-2493

	P.O. NO.	TERMS	Tele: 352-787-2493
1	DEC 2018	Due on receipt	The state of the s

QUANTITY	DESCRIPTION	RATE	AMOUNT
1 1 1 1	Monthly (2018) Sewer and Water Plant Inspection, Set (2018) Bacteriological Analyses Set (2018) Monthly CBOD/TSS Analysis - Sewer EFFLUENT Each (2018) Fecal Coliform Analysis - Sewer EFFLUENT Each (2018) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT Each (2018) Total Phosphorus Analyses - SEWER Florida Sales Tax	755.00 140.00 40.00 30.00 95.00 90.00 7.00%	755.00 140.00 40.00 30.00 95.00 90.00 0.00
	Piorita Sales Tax	7.0078	0.00
a			
**			

Please include INVOICE NUMBER on payment

loral

\$1,150.00

Invoice

DATE INVOICE # 2/3/2019 331149

Tele: 352-787-2493

BILL TO

accounting@fusIllc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

P.O. NO.	TERMS	Tele: 352-787-2493
JAN 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
. 1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
1	Each, (Year 2019) ANNUAL - Nitrate Analysis - Sewer Effluent - 19 Jan 2019	60.00	60.00
1	Set (Year 2019) ANNUAL CBOD/TSS Analysis - Sewer INFLUENT - 9 Jan 2019	45.00	45.00
	Florida Sales Tax	7.00%	0.00
		-	

Total

\$1,270.00

INVOICE #

DATE INVOICE # 3/3/2019 331293

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

P.O. NO.	TERMS	Tele:	352-7	87-2493
FEB 2019	Due on receipt			

QUANTITY	TITY DESCRIPTION		AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
	Each, Air Compressor, Pancake, with check valve and fittings, Jan 2019	150.00	150.007
	Florida Sales Tax	7.00%	10.50
*			

Total

\$1,325.50

Invoice

DATE INVOICE # 4/3/2019 331441

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

		P.O. NO.	TERMS	Tele: 352	-787-2493
		MAR 2019	Due on receipt		40,
QUANTITY		DESCRIPTION		RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,		770.00	770.00	
1			140.00	140.00	
1			40.00	40.00	
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT			30.00	30.00
1				95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER			90.00	90.00
	8 Ft., 3/8 Chlorine Tubing, High Pressure, Installed, 22 Mar 2019 - WATER Lake Yale			2.215	17.72
1	Each, Chlorine Injection Place Back in Service,	하다 아이들 아이들 아이들 아이들 아이들이 아이들이 아이들이 아이들이 아이	2000 (1805) : [[[[[[[[[[[[[[[[[[[36.00	36.00
1	Each (Year 2018) ANN Report - WATER - Ma	UAL EPA Drinkin		260.00	260.00
5	Each (1st Half 2019) C Reporting - WATER -	opper and Lead An		70.00	350.00
	Florida Sales Tax	Socialism described in the model and activities where it is a second of the second of		7.00%	1.24
	14				
		* 25	8		
	15				e e
	+				
	*****THANK YOU*** le INVOICE NUMBER		es constant	otal	\$1,829.96

Invoice

DATE INVOICE # 5/3/2019 331600

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 3336 Grand Blvd, Suite 102 Holiday, FL 34690

	P.O. NO.	TERMS	Tele: 352	2-787-2493
	APR 2019	Due on receipt	* * * * * * * * * * * * * * * * * * *	- 1+3a,5a, ii 1-74 - +
I	DESCRIPTION		RATE	AMOUNT

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
	Each (1st Half 2019) Copper and Lead Analyses and Reporting - WATER - 29 & 30 Apr 2019	70.00	350.00
4	Each, (2019) ANNUAL Reduced Pressure Zone Backflow Preventer Test and Certification, 19 Apr 2019	35.00	140.00
	Florida Sales Tax	7.00%	0.00
Terri			
25 10 10			

Total

\$1,655.00

Invoice DATE INVOICE # 6/3/2019 331746 Tele: 352-787-2493

BILL TO	
accounting@fus1llc	
LAKE YALE UTILITIES	
5911 Trouble Creek Road	
New Port Richey, FL 34652	

P.O. NO.	TERMS	Tele: 352-787-2493
MAY 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1 1 1 1 1	Monthly (2019) Sewer and Water Plant Inspection, Set (2019) Bacteriological Analyses Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFL Each (2019) Fecal Coliform Analysis - Sewer EFFLUE Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUE Each (2019) Total Phosphorus Analyses - SEWER	770.00 140.00 140.00 NT 30.00 95.00 NT 90.00	770.00 140.00 40.00 30.00 95.00
	Florida Sales Tax	7.00%	0.00
			ž

Invoice

DATE INVOICE # 7/3/2019 331893

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493
JUN 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
2	Set, (Year 2019) ANNUAL - Nitrate and Nitrite, Collection, Transportation, Analyses and DEP Reporting - Drinking Water 27 Jun 2010, Lake Vole & Sandning	95.00	190.00
	Water - 27 Jun 2019 - Lake Yale & Sandpiper Florida Sales Tax	7.00%	0.00
		*	
		-	

Total

\$1,355.00

Invoice

DATE	INVOICE #	
8/3/2019	332052	

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

	P.O. NO.	TERMS	Tele: 352-787-2493
T	JUL 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
. 1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
	50lb pail Chlorine Stix, 12 Jul 2019 - SEWER	148.84	148.847
	Each, Stoddard Replacement Filter, #108, 12 Jul 2019 - SEWER Blowers	47.21	94.427
1	Each, B50 Belt, Installed, 12 Jul 2019 - SEWER Blower	49.55	49.557
	Each, Repair Broken Diffuser Air Line by Capping with Sch 40 Cap	45.00	45.007
1	Each, Chlorine Injection Point Service, Dismantle, Clean and Place Back in Service, 12 Jul 2019 - WATER Sandpiper	36.00	36.00
	Florida Sales Tax	7.00%	23.65
		del a	

Please include INVOICE NUMBER on payment

Total

\$1,562.46

Invoice

DATE INVOICE # 9/3/2019 332213

Tele: 352-787-2493

BILL TO	
accounting@fus1llc	
LAKE YALE UTILITIES, LLC	
5911 Trouble Creek Road	
New Port Richey, FL 34652	

P.O. NO. TERMS Tele: 352-787-2493

AUG 2019 Due on receipt

QUANTITY	DESCRIPTION	RATE	AMOUNT
1 Monthly (2019) Sewer and Water Plant Inspection, 1 Set (2019) Bacteriological Analyses		770.00	770.00
		140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
10	Each, Chlorine Stix, 6 Aug 2019 - SEWER	2.99	29.90
	Florida Sales Tax	7.00%	0.00
		7.0	

Total

\$1,194.90

636

General Utilities
P. O. Box 491221

Leesburg, FL 34749-1221

Invoice

DATE INVOICE # 10/3/2019 332367

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

P.O. NO.	TERMS	Tele: 352-787-2493	
SEP 2019	Due on receipt		

	The state of the s		AMOUNT
QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
1	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling,	95.00	95.00
	Transport, Analyses and Reporting - Sewer EFFLUENT		
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
î	Each, (2019) ANNUAL Reduced Pressure Zone Backflow	60.00	60.00
	Preventer Test and Certification, 4 Oct 2019 - SEWER		
1	Each, Pulsafeeder A Plus Electronic Chlorine Metering Pump,	497.87	497.877
	SN-986162, 30 GPD, WATER Lake Yale	32 32 3	
	Florida Sales Tax	7.00%	34.85
	Piorita Sales Tax	, , , , , , , , , , , , , , , , , , ,	

Please include INVOICE NUMBER on payment

Total

\$1,757.72

Invoice

DATE	INVOICE #	
11/3/2019	332526	

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

	P.O. NO.	TERMS	Tele: 352-787-2493
Ī	OCT 2019	Due on receipt	

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
- 1	Set (2019) Bacteriological Analyses	140.00	140.00
1	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
1	Each (2019) Monthly, Total Nitrogen as N, Sampling, Transport, Analyses and Reporting - Sewer EFFLUENT	95.00	95.00
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
	Florida Sales Tax	7.00%	0.00

Please include INVOICE NUMBER on payment

Total

\$1,165.00

General Utilities P. O. Box 491221

Leesburg, FL 34749-1221

Invoice

DATE	INVOICE #
12/3/2019	332681

Tele: 352-787-2493

BILL TO

accounting@fus1llc LAKE YALE UTILITIES, LLC 5911 Trouble Creek Road New Port Richey, FL 34652

1	P.O. NO.	TERMS	Tele: 352-787-2493	Ī
	NOV 2019	Due on receipt		

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Monthly (2019) Sewer and Water Plant Inspection,	770.00	770.00
	Set (2019) Bacteriological Analyses	140.00	140.00
	Set (2019) Monthly CBOD/TSS Analysis - Sewer EFFLUENT	40.00	40.00
	Each (2019) Fecal Coliform Analysis - Sewer EFFLUENT	30.00	30.00
	Each (2019) Monthly, Total Nitrogen as N, Sampling,	95.00	95.00
	Transport, Analyses and Reporting - Sewer EFFLUENT		
1	Each (2019) Total Phosphorus Analyses - SEWER	90.00	90.00
	Ft., 3/8" Chlorine Suction Tubing, Installed, 22 Nov 2019 - SEWER	2.86	57.201
1	Each, Chlorine Foot Valve, 22 Nov 2019 - SEWER	67.50	67.507
•	Florida Sales Tax	7.00%	8.73
		1	
			k.
	*****THANK YOU*********		

Please include INVOICE NUMBER on payment

otai

\$1,298.43

Lake Yale Utilities LLC Staff's Second Data Request October 26, 2020

Bad Debt Expense

23. Provide support showing actual bad debt expense from January 2017 through September 2020. In addition, provide the estimated bad debt expense through the end of 2020. This includes, but it is not limited to billing registers, descriptions, and calculations, showing how bad debt is determined and calculated.

See attached Account Aging reports that are used to determine the bad debt expense.

At year-end, the bad debt expense is determined by totaling the unpaid balances of all closed accounts which received their last payment at least 90 days prior to year-end. For example, the 2020 bad debt expense will total the unpaid balances of accounts with a last payment that occurs between October 1, 2019 and September 30, 2020.

The total bad debt expense determined by this method is split 50/50 between Water 670 and Wastewater 770.

2017 - Water \$230.08, Wastewater \$230.08

To bring the bad debt expense current in 2017, the total of all closed account balances in the billing system report (\$263.41) was added to the amount of bad debt reported by the previous owner of the utility when it was purchased in 2017.

2018 - Water \$70.42, Wastewater \$70.42

For the 2018 Annual Report, 8 closed accounts had an unpaid balance and last payment in the 12-month period that determines bad debt. One additional account with a balance of 40 cents was added to the total.

2019 – Water \$195.74, Wastewater \$195.75

For the 2019 Annual Report, 6 closed accounts had a balance and last payment in the 12-month period that determines bad debt.

Jan-Sep 2020 - \$28.78

As of today, 1 closed account with a last payment date between 10/1/2019 and 9/30/20 has an unpaid balance of \$28.78

<u>2020 Estimate</u> – \$28.78

Because it is already past the last payment cutoff date of September 30, 2020, we estimate that the total bad debt expensed in 2020 will be \$28.78 unless the account is paid in full before year-end.

Last layment

10/1/2020 12:37:50 PM

Account Aging

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 - 60	> 60	Current Balance
Richard Hastings	396	907MBD	, 37907 Maywood Bay Dr	10/10/2010	0.00	0.00	25.59	25.59
Sharon Morgulec	142	202LSD	202 N. Lake Shore Dr.	9/28/2017	0.00	0.00	61.78	61.78
2Anthony Deprisco	397	913MBD	37913 Maywood Bay Dr	12/5/2017	-6.65	0.00`	00,0	-6.65
zBrenda Webb	155	317MD	317 Magnolia Dr.	10/10/2010	0.00	0.00	79.05	79.05
zBrian Meyer	400	916MBD-I	37916 Maywood Bay Dr	10/7/2019	0.00	0.00	28.78	28.78
zCherie English	343	810SHW	11810 Sussex Hill Way	5/29/2018	0.00	0.00	1.75	1.75
zDeborah K. Sutton	117	1303OC-2	1303 Oak Ct.	9/27/2019	0.00	0.00	26.58	26.58
zGary Trump	152	214LSD	214 N. Lake Shore Dr.	10/10/2010	0.00	0.00	84.12	84.12
z.lames & Cheryl Smith	157	. 319MD	319 Magnolia Dr.	12/31/2018	0.00	0.00	142.63	142.63
zJoan Seath	117	1303OC	1303 Oak Ct.	10/4/2018	0.00	0.00	119.43	119.43
zMargery Miller	97	511CD	511 Cardinal Dr.	10/10/2010 15 http://doi.org/10/2010	0.00	0.00	14.04	14.04
zMark Kimbel	232	436 LL P	38436 Langlois Pl.	3/5/2019	0.00	0.00	21.55	21.55
zMichael & Terrence Smith	137	401OD	401 Oak Dr.	10/10/2010	0.00	0.00	22.80	22.80
zMichael Prather	59	709FD	709 Flamingo Dr.	10/27/2017	0.00	0.00	46.47	46.47
zMike Miller	431	001MBD	38001 Maywood Bay Dr	6/4/2018	0.00	0.00	24.75	24.75
zNadine Monroe	59	709FD-1	709 Flamingo Dr.	2/12/2019	0.00	. 0.00	35.71	35.71
zNancy Herman	479	920MS-I	37920 Monticello St1	4/1/2020	-0.82	0.00	0.00	-0.82
zPaul Kawczk	196	103LSC-I	103 Lake Shore CirI	9/5/2017	-4.27	0.00	0.00	-4.27
zPaul Kawczk	195	103LSC	103 Lake Shore Cir.	9/5/2017	4.26	0.00	0.00	426
zRaymond Babcock	122	4170D	417 Oak Dr.	2/15/2018	-4.00	0.00	0.00	-4.00
zRichard Pearson	- 202	310LLP	38310 Langlois Pf.	8/21/2020	25.21	0.00	0.00	25.21
zRobert Molinary	319	618MC	11618 Martell Ct.	7/9/2018	0.00	0.00	35.62	35.62
zRobert Molinary	320	618MC-1	11618 Martell CtI	7/9/2018	0,00	0.00	0.53	0.53
zSandra Nielsen & Ralph Ni	41	817PD	817 Pine Dr.	11/9/2018	-1.00	0.00	0.00	-1.00
zWilliam L. Miller	64	624SPD	624 Sandpiper Dr.	12/23/2018	4.00	0.00	0.00	-4.00
***************************************				Report Totals	n 21	0.00	774-18	771 30

Report Totals

771.39

+90 day - 13 and Nebt 70fal Jon - 5 p2020

28,78

Customer

Anthony Deprisco

Bernice Hatton

Billy Greene

Letha Luke

Margery Miller

Richard Hastings

Sharon Morgulec

zEdward Luke

ZGary Trump

zPaul Kawczk

zPaul Kawczk

zRaymond Babcock

zMichael Prather

Read

Seq

397

414

165

352

97

396

142

173

152

59

196

195

122

Account

Number

913MBD

915SW-I

230LSD

842SHW

511CD

907MBD

202LSD

1408AD

214LSD

709FD

103LSC-I

103LSC

4170D

Service Adr

11915 Salina Way -I

230 N. Lake Shore Dr.

11842 Sussex Hill Way

37907 Maywood Bay Dr

202 N. Lake Shore Dr.

214 N. Lake Shore Dr.

103 Lake Shore Cir. -I

103 Lake Shore Cir.

417 Oak Dr.

511 Cardinal Dr.

1408 Azalea Dr.

709 Flamingo Dr.

37913 Maywood Bay Dr

BAD DEST EXPENSE REPORT LAST PAYMENT IN 2017

3/22/2018 6:38:24 PM

-4.27

-4.26

-4.00

285.53

Ac	cou	int	Agi	ng
			3.	

Last Payment Date

12/5/2017

10/10/2010

11/13/2017

12/20/2017

10/10/2010

10/10/2010

9/28/2017

1/11/2018

10/10/2010

10/27/2017

9/5/2017

9/5/2017

2/15/2018

Report Totals

+-	263.41	-Lya	Current
81 (81 - 446	> 446	Balance
-6.65	0.00	20.00	-6.65
0.00	11.02	0.00	11.02
0.00	20.39	0.00	20.39
45.30	0.00	0.00	45.30
0.00	14:04	0:00	14:04
0.00	25.59	0.00	25.59
0.00	61.78	0.00	61.78
-4.00	0.00	0.00	-4.00
0.00	84.12	0.00	84.12
0.00	46.47	0.00	46.47

0.00

0.00

0.00

0.00

		\overline{W}	S
\$196,75	Lake Yale Troatment Assoc	98.37	98.38
\$ 263,41	Lake Yale Utilities	131.71	131,70
		gettilgene i fra fra hjefret freggest til flemde sperifikeret i til trenge	The security of a subsect any recent
		230,08	230,08

0.00

0.00

0.00

263.41

-4.27

-4.26

-4.00

22.12

Last Payment 10-1-17 to 9-30-18 2/1/2019 12:53:33 PM

Account Aging

Account Aging								
Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 - 60	> 60	Current Balance
Brenda Webb	155	317MD	317 Magnolia Dr.	10/10/2010	0.00	0.00	79.05	79.05
Richard Hastings	396	90 7MBD	37907 Maywood Bay Dr	10/10/2010	0.00	0.00	25.59	25.59
Sheron Morgulec	142	202LSD	202 N. Lake Shore Dr.	9/28/2017	0.00	0.00	61.78	61.78
zAnthony Deprisco	397	913MBD	37913 Maywood Bay Dr	[12/5/2017	-6. 65	0.00	0.00	-6.65
zCherie English	343	810SHW	11810 Sussex Hill Way	5/29/2018	0.00	0.00	1.75	1.75
zGary Trump	152	214LSD	214 N. Lake Shore Dr.	10/10/2010	0.00	0.00	84.12	84.12
zMargery Miller	97	511CD	511 Cardinal Dr.	10/10/2010	0.00	0.00	14.04	14.04
zMichael & Terrence Smith	137	401OD	401 Oak Dr.	10/10/2010	0.00	0.00	22.80	22.80
zMichael Prather	59	709FD	709 Flamingo Dr.	10/27/2017	0.00	0.00	46.47	46.47
zMike Miller	431	001MBD	38001 Maywood Bay Dr	6/4/2018	0.00	0.00	24.75	24.75
zPatsy Adams	102	4160D-12	416 Oak Drl	12/14/2018 🔆	0.00	0.00	0.40 🔭	0.40
zPaul Kawczk	196	103LSC-I	103 Lake Shore CirI	9/5/2017	-4.27	0.00	0.00	-4.27
zPaul Kawczk	195	103LSC	103 Lake Shore Cir.	9/5/2017	-4.26	0.00	0.00	426
zRaymond Babcock	122	417OD	417 Oak Dr.	2/15/2018	-4.00	0.00	0.00	4 .00
zRobert Eastes	321	622MC	11622 Martell Ct.	3/1/2018	0.00	0.00	77.79	77.79
zRobert Molinary	319	618MC	11618 Martell Ct.	7/9/2018	0.00	0.00	35.62	35.62
zRobert Molinary	320	618MC-1	11618 Martell Ctl	7/9/2018	0.00	0.00	0.53	0.53
zSandra Nielsen & Ralph Ni	41	817PD	817 Pine Dr.	11/9/2018	-1.00	0.00	0.00	-1.00
zWilliam L. Miller	64	624SPD	624 Sandpiper Dr.		4.00 ₁	0.00	0.00	

Report Totals

+90 days Total 140,84
Bad Debt 140,84

0.00

-24.18

474.69

450.51

Last pagment 10-1-18 to 9-30-19

12/31/2019 10:54:38 AM

Account Aging

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 - 60	> 60	Current Balance
Brenda Webb	155	31 7M D	317 Magnolia Dr.	10/10/2010	0.00	0.00	79.05	79.05
Richard Hastings	396	907MBD	37907 Maywood Bay Dr	10/10/2010	00,0	0.00	25.59	25.59
Sharon Morgulec	142	202LSD	202 N. Lake Shore Dr.	9/28/2017	0.00	0.00	61.78	61.78
zAnthony Deprisco	397	913MBD	37913 Maywood Bay Dr	12/5/2017	-6.65	€0.00	0.00	6.65
zBrian Meyer	400	916MBD-I	37916 Maywood Bay Dr	10/7/2019	0.00	0.00	28.78	28.78
zCherle English	343	810SHW	11810 Sussex Hill Way	5/29/2 018	0.00	0.00	1.75	1.75
zDeborah K. Sutton	117	1303OC-2	1303 Oak Ct.	9/27/2019	0.00	0.00	26.58	26.58
zGary Trump	152	214LSD	214 N. Lake Shore Dr.	10/10/2010	00.0	0.00	84.12	84.12
zJames & Cheryl Smith	157	319MD	319 Magnolia Dr.	12/31/2018	0.00	0.00	142.63	142.63
z.Joan Seath	117	1303OC	1303 Oak Ct.	10/4/2018	0.00	0.00	119.43	11943
zMargery Miller	97	511CD	511 Cardinal Dr.	10/10/2010	0.00	0.00	14.04	14.04
zMark Kimbel	232	436LLP	38436 Langlois Pl.	3/5/2019	0.00	0.00	21.55	21.55
zMichael & Terrence Smith	137	401OD	401 Oak Dr.	10/10/2010	0.00	0.00	22.80	22.80
zMichael Prather	59	709FD	709 Flamingo Dr.	10/27/2017	0.00	0.00	46.47	46.47
zMike Miller	431	001MBD	38001 Maywood Bay Dr	6/4/2018	0.00	0.00	24.75	24.75
zMike Morgan	127	312MÖ	312 Magnolia Dr.	1/22/2019	0.00	0.00	45.59	45.59
zNadine Monroe	59	709FD-1	709 Flamingo Dr.	2/12/2019	0.00	0.00	35.71	35.71
zPatsy Adams	102	416OD-12	416 Oak Dr1	12/14/2018	0.00	0.00	0.40	0.40
zPaul Kawczk	196	103LSC-I	103 Lake Shore CirI	9/5/2017	-4.27	0.00	0.00	-4.27
zPaul Kawczk	195	103ESC	103 Lake Shore Cir.	9/5/2017	. 4.26	0.00	0.00	-4.26
zRaymond Babcock	122	417OD	417 Oak Dr.	2/15/2018	-4.00	0.00	0.00	-4.00
zRobert Eastes .	321	622MC	11622 Martell Ct.	3/1/2018	0.00	0.00	77.79	77.79
zRobert Molinary	319	618MC	11618 Martell Ct.	7/9/2018	0.00	0.00	35.62	35.62
zRobert Molinery	320	618MC-I	11618 Martell CtI	7/9/2018	0.00	0.00	y 0.53	0.53
zSandra Nielsen & Ralph Ni	41	817PD	817 Pine Dr.	11/9/2018	-1.00	0.00	0.00	-1.00
zWilliam L Miller	64	624SPD	624 Sandpiper Dr.	12/23/2018	-4.00	0,00	0.00	4.00

Page 2 of 2

Account Aging

Customer	Read Seq	Account Number	Service Adr	Last Payment Date	< 30	30 -	60	> 60	Current Balance
				Report Totals	-24.18	1	0.00	. 894.96 [‡]	870.78

+90 days Total \$391.49
Bud Debt